
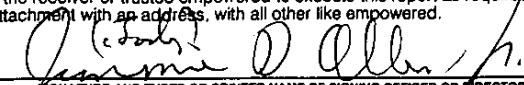


FILED
Apr 15, 2008 8:00 am
Secretary of State

04-15-2008 90012 030 ***150.00

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # H69104					
1. Entity Name BOBBY BOWDEN'S SEMINOLE FOOTBALL CAMP, INC.					
Principal Place of Business MOORE ATHLETIC CENTER 525 STADIUM DRIVE WEST TALLAHASSEE, FL 32306 US			Mailing Address P O BOX 2195 TALLAHASSEE, FL 32316 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2860758	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
QUALLS, TIMOTHY R 225 S ADAMS STREET SUITE 200 TALLAHASSEE, FL 32301			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City	FL	Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD <input type="checkbox"/> Delete ALLEN, JODY MOORE ATHLETIC CENTER, 525 STADIUM DR W TALLAHASSEE, FL 32306		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Coley, James Moore Athletic Center, 525 Stadium Dr.W Tallahassee, FL 32306	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete ANDREWS, MICKEY MOORE ATHLETIC CENTER, 525 STADIUM DR W TALLAHASSEE, FL 32306		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Helbert, Jocelyn Moore Athletic Center, 525 Stadium Dr.W Tallahassee, FL 32306	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete AMATO, CHUCK MOORE ATHLETIC CENTER, 525 STADIUM DR W TALLAHASSEE, FL 32306		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Bob LaCivita Moore Athletic Center, 525 Stadium Dr. W Tallahassee, FL 32306	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Delete LILLY, JOHN MOORE ATHLETIC CENTER, 525 STADIUM DR W TALLAHASSEE, FL 32306		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete HAGGINS, ODELL MOORE ATHLETIC CENTER, 525 STADIUM DR W TALLAHASSEE, FL 32306		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Delete ORAVETZ, RANDY MOORE ATHLETIC CENTER, 525 STADIUM DR W TALLAHASSEE, FL 32306		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  2/26/08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT
50002545
#69104

Continuation of #10 Officers and Directors

Please delete Stacy Wilkshire as Treasurer of Bobby Bowden's Seminole Football Camp, Inc.

ATTACHMENT
50002545
H69104
YOUNG VAN ASSENDERP, P.A.

ATTORNEYS AT LAW

Attorneys:

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Of Counsel Attorneys:

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David B. Erwin
Joseph W. Landers Jr.


George Ann C. Bracko

22 February 2008

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Pursuant to Florida Statutes Section 617.0807, and Article III, Section 6 and Article IV, Section 3 of the Bobby Bowden's Seminole Football Camp, Inc. Bylaws, Staci Wilkshire has resigned her position as Treasurer with the Bobby Bowden Seminole Football Camp, Inc. Ms. Wilkshire should not longer be documented as holding the Treasurer position for the Bobby Bowden's Seminole Football Camp, Inc. in the Florida Department of State Division of Corporations 2008 For Profit Corporation Annual Report.



Tim Qualls, Esq.
Registered Agent